TOWN OF UNION

Office of Selectmen, Assessors, Town Clerk, Tax Collector and Treasurer

GILBERT DOUGHTY MEMORIAL SCHOLARSHIP

MINIMUM REQUIREMENTS:

- 1. Student is a resident of the Town of Union.
- 2. Student is a Senior graduating from High School.
- 3. Student is going on to post-secondary education or training.
- 4. High School transcript is to accompany application
- 5. Three letters of recommendation (non-relatives) are to be submitted with application.
 One should be from the academic community and two others should be from local community sources.

DEADLINE FOR SUBMISSION: MAY 15

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

LATE APPLICATIONS WILL NOT BE CONSIDERED.

ALL APPLICATIONS ARE TO BE DELIVERED OR MAILED IN A SEALED ENVELOPE TO:

Board of Selectmen Town of Union P.O. Box 186 Union, Maine 04862

APPLICATION FOR GILBERT DOUGHTY MEMORIAL SCHOLARSHIP

NAME:				
	Last	First		Middle
RESIDENCE:				
	Street Address (and Mailing Addres	s, if different)	
	100000000000000000000000000000000000000			
Town				Social Security Number
TELEPHONE:	**************************************	DATE OF E	BIRTH	
Are you currently	a resident of the	Town of Union?	Yes	or No
HIGH SCHOOL T		BE SUMITTED W	/ITH APPLICA	ΓΙΟΝ. THIS SHOULD ALSO
HIGH SCHOOL AT	TENDED	JUNIOR YEAR		
		SENIOR YEAR		
EXPECTED DATE	OF GRADUATION			7 - 20 -
HONOR ROLL?		If Yes, Whe	n?	
	Yes or No		T	
Have you been ac	cepted to a schoo	l for further train	ing or educati	ion?
			J	Yes or No
If Yes, give the <u>C</u> EDUCATIONAL	OMPLETE NAM LINSTITUTION	ME, ADDRESS I YOU PLAN T	AND ZIP CO O ATTEND:	ODE OF THE
	444		100000000000000000000000000000000000000	
Name of Program	:	When w	vill you start?	
Will you be attend	ing full-time or pa	art-time?		

DOUGHTY SCHOLARSHIP

Enter current information (past two years) in the following categories.
AWARDS:
PROJECTS:
COMMUNITY ACTIVITIES:
EXTRA CURRICULAR ACTIVITIES:
SCHOLARSHIPS RECEIVED:
OTHER INFORMATION THAT YOU WOULD LIKE TO HAVE CONSIDERED. (Include volunteering, employment, and other accomplishments and pursuits.)

DOUGHTY SCHOLARSHIP

What are your educational and/or training goals?	
Why should you receive this award?	
SIGNATURE	DATE
PLEASE ATTACH:	
High School or College Transcripts	
Three letters of Recommendation	

Revised February 2005 Revised August 2008